VERIFICATION SUMMARY REPORT INSTRUCTIONS

Bureau of Nutrition Programs and School Transportation

The Verification Report must be submitted by January 15, 2007. The Verification Summary Report is part of the CNP 2000 system. On the green navigational bar, verification is to the right of claims. December claim for reimbursement (and subsequent claims, if applicable) will be held if the Verification Summary Report is not completed on the CNP 2000 system by January 15, 2007. Contact Nancy Christensen at 515-281-5663 or nancy.christensen@iowa.gov if you have questions.

Due Dates:

• November 15, 2006:

Verification activities must be completed. Verification of an individual application is complete when a household's eligibility for the level of benefits for which it was approved is verified, or changed to a higher level of benefit, or a letter of adverse action has been sent informing the household that benefits will be reduced or terminated. If you do not meet this deadline, you must submit a corrective action plan on the Verification Summary Report describing how you will meet the deadline in the future.

January 15, 2007:

Verification Summary Report must be completed on the CNP 2000 system. December claim for reimbursement (and subsequent claims, if applicable) will be held if the Verification Summary Report is not completed on the CNP 2000 system by this date.

Section I: Enrollment, Application and Approval Information (Pre-Verification)

- Line 1. Choose the type of application used for students who apply for Free/Reduced Price Meal benefits. NOTE: USDA requires the use of household applications.
- **Line 2.** Columns A and B, are automatically filled based on the information provided in your application.
- Line 3. Columns A and B, are automatically filled based on the information provided on your October claim. Check to see if the information is correct. Notify the Bureau if the information is not correct.

SPECIAL NOTE: All boxes for LINES 4 through 11 must contain a number. Enter ZEROES for all responses that are not APPLICABLE to your SFA.

Report Lines 4 through 5 COLUMN A as of the last operating day in October, 2006. The totals for free eligible and reduced price eligible should be the same as the numbers reported in the unduplicated count, for the October claim. Column B requires information on <u>applications</u> as of October 1, 2006. NOTE THAT THE DATES FOR COLUMNS A AND B ARE DIFFERENT.

Line 4, Column A will be the sum of numbers of <u>students</u> reported in 4-1 through 4-4, Column A and <u>the same as the number reported in the unduplicated count, for the October claim.</u>

Information in Column A is reported as of October 31, 2006.

Line 4, Column B requires no information.

Line 4.1 In Column A, report the number of FREE ELIGIBLE students in the SFA who are not subject to verification. This will include those directly certified, on the homeless liaison list, migrants, students income eligible for Head Start or pre-K Even Start, <u>residential</u> students at RCCIs, and non-applicants approved by local officials. DO NOT include the number of students in the SFA determined to be free eligible for Provision 2/3 schools not operating a base year.

There is no **Column B** in this category.

Line 4-2. In Column A, report the number of students approved as FREE ELIGIBLE in the SFA who were approved based on Food Assistance (Food Stamps)/FIP (TANF)/FDPIR numbers submitted on an application (categorically eligible).

In **Column B**, report the number of applications approved based on categorical eligibility as of October 1, 2006.

Line 4-3. In Column A, report the number of students approved as FREE ELIGIBLE in the SFA based on income/household size information submitted on an application. Foster children, considered a household of one, who are approved as FREE ELIGIBLE based on income/household size, are included in this category.

In **Column B**, report the number of applications approved based on income as of October 1, 2006.

Line 4.4. In **Column A**, report the number of FREE ELIGIBLE students in the SFA for Provision 2/3 schools not operating a base year. This should be auto populated with a zero if you are not a Provision 2/3 school.

There is no **Column B** in this category.

Line 5, Column A, will be the number of <u>students</u> approved as REDUCED PRICE ELIGIBLE in the SFA as of October 31, 2006. This will be the same <u>as the number reported in the unduplicated count</u>, for the October claim.

Line 5, Column B, will be the number of <u>applications</u> approved as REDUCED PRICE ELIGIBLE in the SFA as of October 1, 2006.

Line 5-1. In Column A, report the number of REDUCED PRICE ELIGIBLE students in the SFA for Provision 2/3 schools not operating a base year. This should be auto populated with a zero if you are not a Provision 2/3 school.

There is no **Column B** in this category.

Section II. Results of Verification, by Application Type

Line 6. Choose the type of verification process used by the SFA. All SFAs selecting one or more applications for verification based on error prone criteria should report the type of verification used as "focused." An SFA that selects its entire verification sample at random, either because it has no error-prone applications or because it qualifies for the Alternative Sample Size and chooses the 3000/3 percent option should report the type of verification used as "random."

Report on Lines 7 through 12 the results of the verification process by the type of initial application approval. Lines 7 through 11 are required. Report these lines as of the date of completion of verification. Verification is considered complete when all applications are verified and all letters of adverse action have been mailed to households whose benefit levels have changed. **Line 12 is optional and is reported as of February 15.**

Enter ZEROES for all responses that are not APPLICABLE to your SFA.

- **Line 7.** Report the number of applications with no change in eligibility and the total number of students on those applications, for each application type.
- **Line 8.** Report the number of applications for which eligibility was changed to FREE <u>based on documentation provided by the household</u> and the total number of students on those applications, for each application type.
- **Line 9.** Report the number of applications for which eligibility was changed to REDUCED PRICE <u>based on documentation provided by the household</u> and the total number of students on those applications, for each application type.
- **Line 10.** Report the number of applications for which eligibility was changed to PAID <u>based on documentation provided by the household</u> and the total number of students on those applications, for each application type.
- Line 11. Report the number of applications for which eligibility was changed to PAID <u>because</u> the household did not respond and the total number of students on those applications, for each application type. Report ALL applications for which the household did not respond.
- **Line 12.** OPTIONAL. Report the number of applications for which eligibility was changed to PAID as a result of verification that <u>resubmitted applications</u> and were re-approved for either FREE or REDUCED PRICE meal benefits on or before February 15, and the total number of students on these applications for each application type.
- **Line 13.** Report the date on which verification was completed. If verification was not completed by **November 15**, submit a corrective action plan in the box detailing the steps you will take to ensure the problem does not occur in future years.
- **Line 14.** Enter the name, title, email address and telephone number including area code of the person who can answer questions about this Verification Summary Report.